

Substitute for form 1449A/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>		<b>Complete if Known</b>			
		Application Number	10/687,575		
		Filing Date	October 15, 2003		
		First Named Inventor	Michael J. Hafer		
		Art Unit	3691		
		Examiner Name	Lalita M. Hamilton		
Sheet	1	of	2	Attorney Docket Number	026595-007610US

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code <sup>2</sup> (if known)			
	A81	2003-0040964 A1	02-27-2003	Lacek	
	A82	2004-0205023 A1	10-14-2004	Hafer et al.	
	A83	2006-0243806 A1	11-02-2006	Goodman et al.	
	A84	2006-0259361 A1	11-16-2006	Barhydt et al.	
	A85	2007-0124204 A1	05-31-2007	De Boer et al.	
	A86	2008-0002344 A1	01-03-2008	Gaskill	

FOREIGN PATENT DOCUMENTS							
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup> Kind Code <sup>5</sup> (if known)				
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Examiner Signature	/Lalita Hamilton/ (02/28/2010)	Date Considered	
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Substitute for form 1449B/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(use as many sheets as necessary)</i>		<b>Complete if Known</b>			
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		Examiner Name	Lalita M. Hamilton		
Sheet	2	of	2	Attorney Docket Number	026595-007610US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
	C2	International Application No. PCT/US2009/045308, International Search Report and Written Opinion, 9 pages, July 16, 2009	

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